



NOT TO BE USED FOR TITLE V APPLICATIONS

PERMIT APPLICATION

AUG 09 2010

2010 JUL 16 PM 1:46

*COOP*  
9th Floor, L & C Annex  
401 Church Street  
Nashville, TN 37243-1531  
Telephone: (615) 532-0554  
FAX: (615) 532-0614

APC 20

PLEASE TYPE OR PRINT AND SUBMIT IN DUPLICATE FOR EACH EMISSION SOURCE. ATTACH APPROPRIATE SOURCE DESCRIPTION FORMS.

1. ORGANIZATION'S LEGAL NAME ROCKET OIL COMPANY			/// FOR	APC COMPANY--POINT NO. <b>18-0171</b>
2. MAILING ADDRESS (ST/RD/P.O. BOX) P.O. Box 650			/// APC	APC LOG/PERMIT NO. <b>63861</b>
CITY POWELL	STATE TN	ZIP CODE 37849	PHONE WITH AREA CODE (865) 938-2042	
3. PRINCIPAL TECHNICAL CONTACT ANNETTE SELLERS			PHONE WITH AREA CODE (865) 938-2042	
4. SITE ADDRESS (ST/RD/HWY) <b>6677 Peavine Rd.</b>			COUNTY NAME <b>Cumberland County</b>	
CITY OR DISTANCE TO NEAREST TOWN <b>Crossville, TN</b>		ZIP CODE <b>38558</b>	PHONE WITH AREA CODE <b>N/A</b>	
5. EMISSION SOURCE NO. (NUMBER WHICH UNIQUELY IDENTIFIES THIS SOURCE) <b>Weigel's #72</b>			PERMIT RENEWAL YES ( ) NO ( <input checked="" type="checkbox"/> )	
6. BRIEF DESCRIPTION OF EMISSION SOURCE  CONVENIENCE STORE WITH RETAIL GAS SALES				

7. TYPE OF PERMIT REQUESTED				
CONSTRUCTION ( <input checked="" type="checkbox"/> )	STARTING DATE <b>EST'd 11/16/10</b>	COMPLETION DATE <b>EST'd 12/30/10</b>	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
OPERATING ( )	DATE CONSTRUCTION STARTED	DATE COMPLETED	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
LOCATION TRANSFER ( )	TRANSFER DATE		LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
ADDRESS OF LAST LOCATION				

8. DESCRIBE CHANGES THAT HAVE BEEN MADE TO THIS EQUIPMENT OR OPERATION SINCE THE LAST CONSTRUCTION OR OPERATING PERMIT APPLICATION.

**N/A**

9. SIGNATURE (APPLICATION MUST BE SIGNED BEFORE IT WILL BE PROCESSED) 		DATE <b>7/14/10</b>
10. SIGNER'S NAME (TYPE OR PRINT) <b>William B. Weigel</b>	TITLE <b>President</b>	PHONE WITH AREA CODE (865) 938-2042



DEPARTMENT OF ENVIRONMENT & CONSERVATION  
AIR POLLUTION CONTROL  
401 CHURCH STREET, L & C ANNEX  
NASHVILLE, TN 37243-1531

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PERMIT APPLICATION FOR STAGE I AND STAGE II VAPOR RECOVERY

FOR APC USE ONLY: COUNTY COMPANY POINT # 18-0171

LOG/PERMIT # \_\_\_\_\_

APC 150

1. FACILITY NAME <u>Weigel's #72</u>	OWNER'S NAME <b>ROCKET OIL COMPANY</b>
SITE ADDRESS (ST/RD) <u>6677 Peavine Rd.</u>	MAILING ADDRESS (ST/RD/P.O. BOX) <b>P.O. BOX 650</b>
CITY, STATE, ZIP CODE <u>Crossville, TN 38558</u>	CITY, STATE, ZIP CODE <u>POWELL, TN 37849</u>
TELEPHONE NUMBER <u>(N/A)</u>	TELEPHONE NUMBER <u>(865) 938-2042</u>

2. CLAIMING INDEPENDENT SMALL BUSINESS (I. S. B.) MARKETER OF GASOLINE AS STATED IN RULE 1200-3-18-.24(2)

YES \_\_\_\_\_ NO X

IF YES, SUBMIT NOTARIZED CERTIFICATION STATING THAT BUSINESS SATISFIES THE I.S.B. DEFINITION CRITERIA FOUND IN 1200-3-18-.24(2) AND PROVIDE THE FOLLOWING INFORMATION:

OWNER'S ANNUAL INCOME FROM REFINING OR MARKETING OF GASOLINE \_\_\_\_\_

OWNER'S TOTAL ANNUAL INCOME \_\_\_\_\_

3. NUMBER, GAS TYPE, CAPACITY, TYPE OF TANK - ABOVEGROUND (AG) UNDERGROUND (UG), INSTALLATION DATE									
TANK #	GAS TYPE	SIZE	TANK TYPE	INST. DATE	TANK #	GAS TYPE	SIZE	TANK TYPE	INST. DATE
1	<u>Reg. UL</u>	<u>20,000</u> GAL	AG / <u>UG</u>	_____	4	_____	_____ GAL	AG / UG	_____
2	<u>Premium</u>	<u>10,000</u> GAL	AG / <u>UG</u>	_____	5	_____	_____ GAL	AG / UG	_____
3	_____	_____ GAL	AG / UG	_____	6	_____	_____ GAL	AG / UG	_____

4. TOTAL NO. GASOLINE NOZZLES 16 MAKE HUSKY MODEL \_\_\_\_\_

5. GASOLINE DISPENSER MAKE GILBARCO MODEL ENCORE 500S

6. TYPE OF STAGE I SYSTEM (CARB EXECUTIVE ORDER) G-70-97-A INSTALLATION DATE \_\_\_\_\_

7. TYPE OF STAGE II SYSTEM (CARB EXECUTIVE ORDER) N/A INSTALLATION DATE \_\_\_\_\_

8. TYPE OF PRESSURE/VACUUM VENT VALVE (IF INSTALLED) MAKE OPW MODEL 623 V1150

9. MAXIMUM MONTHLY THROUGHPUT 500,000 GAL. AVERAGE YEARLY THROUGHPUT 6,000,000 GAL.

10. MINIMUM SLOPE OF STAGE II VAPOR RETURN LINES FROM DISPENSERS TO UNDERGROUND TANKS N/A INCHES PER FOOT

11. TYPE OF PERMIT REQUESTED

CONSTRUCTION ( <u>✓</u> )	STARTING DATE <u>11/16/10</u>	COMPLETION DATE <u>EST'd 12/2010</u>	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
OPERATING ( )	DATE CONSTRUCTION STARTED	DATE COMPLETED	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER

12. SUPPLIER OF GASOLINE

COMPANY NAME **ROCKET OIL COMPANY**

CONTACT NAME Annette Sellers

ADDRESS P.O. BOX 650  
POWELL, TN 37849

ADDRESS (SAME)  
(SAME)

PHONE NUMBER (865) 938-2042

PHONE NUMBER (SAME)

13. SIGNATURE OF APPLICANT

DATE

14. SIGNER'S NAME (TYPE OR PRINT)

TITLE

PHONE NO. WITH AREA  
CODE (865) 938-2042

